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CONFIRMATION NO. 3368

SERIAL NUMBER 09/727,364	FILING DATE 11/29/2000	CLASS 030	GROUP ART UNIT 3724	ATTORNEY DOCKET NO. 688-098	
RULE					
APPLICANTS Travis Nichols, Perry, UT; Blake Gustafson, Perry, UT; ** CONTINUING DATA ***** ** FOREIGN APPLICATIONS ***** IF REQUIRED, FOREIGN FILING LICENSE GRANTED** SMALL ENTITY ** ** 01/05/2001					
Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Allowance Verified and Acknowledged _____ Examiner's Signature Initials		STATE OR COUNTRY UT	SHEETS DRAWING 10	TOTAL CLAIMS 11	INDEPENDENT CLAIMS 1
ADDRESS Sofer & Haroun LLP 317 Madison Ave. Ste. 910 New York, NY 10017					
TITLE Cutting device					
FILING FEE RECEIVED 420	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		



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APPLICANTS Travis Nichols, Perry, UT; Blake Gustafson, Perry, UT;					
** CONTINUING DATA *****					
** FOREIGN APPLICATIONS *****					
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ADDRESS Robert M. Haroun SOFER & HAROUN, LLP Suite 1921 342 Madison Avenue New York, NY 10173					
TITLE Cutting device					
FILING FEE RECEIVED 420	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		